24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
	M - M / D - D / Y - Y - Y
Check if 24-hour report 48-hour report New report Amends report filed	
Full Name of Payee Alliance Fm	Date of Public Distribution/Dissemination
	05 16 Y Y Y Y Y Y
Mailing Address 133 Industrial Avenue	Amount
City State Zip Code	312.50
Hasbrouck Heights NJ 07604	Transaction ID : B498438 Date of Disbursement or Obligation
Purpose of Expenditure Printing of brochure Category/ Type 004	05 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ce Sought: House District:
Kay Hagan Oppose	President State: NC State:
Calendar Year-To-Date Per Election for Office Sought Disb 2014	oursement For: Primary General Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
FedEx	05 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 326 7th Avenue	Amount
City State Zip Code	21.04
New York NY 10001	Transaction ID : B498439 Date of Disbursement or Obligation
Purpose of Expenditure Shipping of invitations for fundraiser Category/ Type 004	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ce Sought: House District:
Kay Hagan Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Dist 201	oursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	333.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	06 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	